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JUN 20 2005

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7590 06/01/2005

Calif Tervo
6387 Caminito Lazaro
San Diego, CA 92111

06/21/2005 AKELECH2 00000020 10608983

01 FC:2501	700.00 DP
02 FC:1504	300.00 DP
03 FC:8001	30.00 DP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/608,983	06/26/2003	Gary L. Taylor	TAYLORG-7	6399
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TITLE OF INVENTION: SECURE DROP BOX

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	YES	\$700	\$300	\$1000	09/01/2005
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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MILLER, WILLIAM L	3677	232-045000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1 <u>Mary Jo Redman</u>
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2 <u>Calif Tervo</u>
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)	3 _____

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature

Calif Tervo

Typed or printed name

Calif Tervo

Date

6/17/05

Registration No.

31,308

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